

RETURN TO CENTRAL FILES  
MASTER DIRECTIVE FILES

UNITED STATES MARINE CORPS  
III Marine Expeditionary Force, FMF  
FPO San Francisco, CA 96606-8400  
and  
Marine Corps Bases, Japan  
Camp Smedley D. Butler, Okinawa  
FPO Seattle, Washington 98773-5001

ForO 3700.1 CA/  
III MEF 3  
MCBJ O&T  
1 Oct 90

FORCE ORDER 3700.1 w/ch 1

From: Commanding General, III Marine Expeditionary Force  
Commander, Marine Corps Bases, Japan  
To: Distribution List

Subj: III MEF MARINE EXPEDITIONARY FORCE AND MARINE CORPS BASE, CAMP  
SMEDLEY D. BUTLER, JAPAN, HELICOPTER SEARCH AND RESCUE (SAR)/  
MEDICAL EVACUATION (MEDEVAC) PROCEDURES

Ref: (a) FMFM 5-3  
(b) MOU between PACAF and 1st MAW for Okinawa Search and  
Rescue (SAR) Helicopter Alert (NOTAL)

Encl: (1) SAR-MEDICAL EVACUATION REQUEST AND BRIEFING FORM  
(2) STANDARD HELO/FIXED WING REQUEST FORM  
(3) HELICOPTER FLIGHT TIME MATRIX

1. Purpose. To promulgate procedures concerning helicopter SAR/  
MEDEVAC assistance on Okinawa and Ie Shima.

2. Information

a. MEDEVACs are classified by precedence, as per reference (a):  
Urgent, Priority and Routine.

(1) Urgent MEDEVAC. Evacuation of critically wounded,  
injured, or ill personnel whose immediate evacuation is a matter of  
life or death.

(2) Priority MEDEVAC. Evacuation of seriously wounded,  
injured or ill personnel who require early hospitalization but whose  
immediate evacuation is not a matter of life or death.

(3) Routine MEDEVAC. Evacuation of deceased person, a  
person with a minor illness or injuries, who requires hospitalization  
not of an immediate nature, or who requires routine transfer between  
medical facilities for further treatment.

b. Determination of the precedence of MEDEVAC is made  
initially by the senior person on the scene. If medical

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personnel are available, they will be consulted to help determine the MEDEVAC precedence.

### 3. Background

a. The primary island SAR/MEDEVAC is provided by the 33rd Aerospace Rescue Squadron (ARS), located at Kadena Air Base. Complete SAR/MEDEVAC services are available from the 33rd ARS 24 hours a day, year round.

b. When SAR/MEDEVAC services are not available from the 33rd ARS due to aircraft non-availability, the WESTPAC Rescue Coordination Center (WESTPAC RCC) will request 1st MAW/MAG-36, via message traffic, to assume the island SAR/MEDEVAC mission until such time as the 33rd ARS can resume this mission.

c. When MAG-36 assumes responsibility for the island SAR/MEDEVAC, there will be no night overwater capability due to aircraft limitations. Normal search range is limited to approximately 70 nautical miles from the Kadena TACAN (Nav Aid) as per reference (b).

d. The goal for response time for SAR/MEDEVAC assistance is to launch within 30 minutes from initial phone notification during normal working hours and one hour after normal working hours and on weekends and holidays.

### 4. Requests for SAR/MEDEVACs

a. SAR and Urgent/Priority MEDEVAC. The following procedures will be adhered to when requests are required for helicopter support.

(1) Units in the NTA will contact the NTA base camp, call sign "NTA", on frequency 69.10 MHZ. Units in the CTA will contact Range Control, call sign, "Range Control", on frequency 49.10 MHZ. Units located on Ie Shima will contact the Operations Support Detachment (OSD) office, call sign, "OSD", on frequency 44.80 MHZ.

(2) Helicopter request for SAR/MEDEVAC can be accomplished by calling directly to the WESTPAC RCC at telephone number 634-2605/<sup>422</sup> using the information in enclosure (1). Once this call is complete or in the event that the RCC cannot be reached, immediately notify the III MEF Command Center at 622-7768/<sup>622-7768</sup>. Additionally, an Urgent MEDEVAC may be relayed directly to the III MEF Command Center over the NTA or CTA/Helo MEDEVAC request net, call sign, "Trophy Command", on frequency 69.10 MHZ.

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(3) If unable to contact the WESTPAC RCC or the III MEF Command Center, requesters should call the 1st MAW Helo Frag Officer at ~~635-29157/3038/3040/3164/3175~~ during working hours or the 1st MAW Duty Officer at 635-3744/3746 after working hours. If unable to contact 1st MAW, requesters should contact the MAG-36 Helo Frag Officer at 636-3012/3263/3962/3364 during working hours or the MAG-36 Duty Officer at 636-3020 after working hours to request a helicopter MEDEVAC.

b. Routine MEDEVAC. Routine MEDEVACs will be accomplished through the use of ground vehicles.

#### 5. Northern Training Area (NTA) Prepositioned MEDEVAC Procedures

a. When night training is conducted in the NTA, MAG-36 will, upon request (enclosure (2)) utilizing routine procedures, preposition a helicopter at LZ-13. This helicopter serves for MEDEVACS of an Urgent or Priority nature only. Once the helicopter launches from the NTA at night, it should complete the mission and return to LZ-13 if fuel and weather permits. If forced to recover at MCAS Futenma during darkness, aircrews should contact Futenma Metro on 290.6 to initiate airfield lighting. The aircrew will remain on alert status until 0700 or properly relieved by the supported unit.

b. MAG-36 aircrews will, upon arrival at LZ-13 as the NTA MEDEVAC, contact the WESTPAC RCC at phone number 634-2605/1422 and the III MEF Command Center at 622-7768/69 with their status and mission capability.   
7706/7571

c. While training in the NTA, personnel requiring Urgent/Priority MEDEVAC will be transported via ground transportation to LZ-13 whenever possible. When the senior ranking authority present and or competent medical personnel determines that an Urgent case cannot reach LZ-13 in time to be effective, the casualty should be moved to the nearest designated LZ for helicopter pick up. Glide Angle Indicator Lights (GAIL) should be used at night in any LZ designated as the MEDEVAC pickup point. These lights can be obtained from the NTA Base Camp and delivered by ground transportation to the Helo LZ to be used. The decision to land in an LZ without proper illumination must be carefully weighed by the Pilot-in-Command based on weather, terrain and extent of personnel injuries. When Night Vision Goggles are utilized, LZ lighting must be Infra-Red (IR) compatible. When designated LZs cannot be reached in time to be effective, then the casualty should be moved to the nearest location that permits hoisting operations. The inherent risks involved in hoisting operations preclude it as a measure to be used at night. Additionally, the daytime use of the hoist will only be requested by the senior Marine present for Urgent MEDEVAC

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3. Filing Instructions. File this change transmittal immediately behind the signature page of the basic Order.



R. H. SHELTON  
Chief of Staff



W. R. MCPHERSON  
Chief of Staff

DISTRIBUTION: III MEF: LIST I/II  
MCBJ: B

Copy to: III MEF: LIST III

# MASTER DIRECTIVES FILE

UNITED STATES MARINE CORPS  
III Marine Expeditionary Force, FMF  
Unit 35601  
FPO AP 96606-5601  
and  
Marine Corps Base  
Camp Smedley D. Butler, Okinawa  
Unit 35001  
FPO AP 96373-5001

ForO 3700.1 Ch 1  
III MEF (3)  
MCBJ (O&T)  
17 MAR 1992

## FORCE ORDER 3700.1 Ch 1

From: Commanding General, III Marine Expeditionary Force  
Commander, Marine Corps Bases, Japan  
To: Distribution List

Subj: III MEF AND MARINE CORPS BASES, JAPAN, HELICOPTER SEARCH  
AND RESCUE (SAR)/MEDICAL EVACUATION (MEDEVAC) PROCEDURES

1. Purpose. To direct pen changes to the basic Order.

### 2. Action

- ✓ a. Page 2, paragraph 4a(2), line 3, add alternate extension "1422" to 634-2605.
- ✓ b. Page 2, paragraph 4a(2), line 6, delete alternate extension "69", add alternate extensions "7706/7571."
- ✓ c. Page 3, paragraph 4a(3), line 3, change phone numbers; "635-2919/3038/3040/3164/3175" to "635-3682/2166."
- ✓ d. Page 3, paragraph 5b, line 3, delete alternate extension "69", add alternate extensions "7706/7571."
- ✓ e. Enclosure (1), change "EMERGENCY HELICOPTER MEDIVAC" to read "EMERGENCY HELICOPTER MEDEVAC."
- ✓ f. Enclosure (1) under EMERGENCY HELICOPTER MEDEVAC paragraph 3, line 2, delete alternate extension "69", add alternate extensions "7706/7571."
- ✓ g. Enclosure (1), paragraph 4, line 3, change phone numbers; "635-2919/3038/3040/3164/3175" to "635-3682/2166."

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when a delay of movement of the casualty would seriously jeopardize recovery of the injured personnel. The attempt to initiate a MEDEVAC pick-up at other than a designated LZ or by use of the hoist must be based on careful consideration of extent of the casualty's injuries, aircraft equipment, and weather conditions. This responsibility rests with the Pilot-in-Command.



R. H. SHELTON  
Chief of Staff



W. R. MCPHERSON  
Chief of Staff

DISTRIBUTION: III MEF: LISTS I/II  
MCBJ: B

Copy to: III MEF: LIST III

SAR-MEDICAL EVACUATION REQUEST AND BRIEFING FORM

1. Requested by: Unit \_\_\_\_\_  
Frequency \_\_\_\_\_  
Call Sign \_\_\_\_\_

2. Injury/Condition/Symptoms: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Pick-Up Location Coord/LZ: \_\_\_\_\_  
LZ will be marked with:  
Panels \_\_\_\_\_ Smoke \_\_\_\_\_ Flares \_\_\_\_\_ Lights \_\_\_\_\_ Other \_\_\_\_\_

EMERGENCY HELICOPTER ~~MEDEVAC~~ ~~MEDIVAC~~

1. Emergency MEDEVACs of an Urgent/Priority nature may be relayed directly to the III Marine Expeditionary Force Command Center over the NTA or CTA/Helo MEDEVAC request net, call sign "Trophy Command." on frequency 69.10 MHz. Units in the CTA should contact "Range Control" on 49.10 MHz and Ie Shima "OSD" on 44.80 MHz while conducting training in these areas. Units should utilize radio communication whenever possible to expedite requests from the field.

2. Request helicopter SAR/MEDEVACs by calling directly to the Western Pacific Rescue Coordination Center (WESTPAC RCC) at telephone number 634-2605/1422.

3. If the RCC cannot be reached, notify the III MEF Command Center, at 622-7768/69.7706/7571.

4. If unable to contact the Western Pacific Rescue Coordination Center or the III MEF command Center, call 1st MAW Helo Frag Officer at 635-2949/3038/3040/3164/3175 during working hours or the 1st MAW Duty Officer at telephone number 635-3744/3746 after working hours.

5. If unable to contact 1st MAW, requesters should contact the MAG-36 Helo Frag Officer at 636-3012/3263 during working hours or the MAG-36 Duty Officer at 636-3020 after working hours request a helicopter MEDEVAC.

Enclosure (1)

# STANDARD HELO/FIXED WING REQUEST FORM

ASSAULT SUPPORT REQUEST FORM			
1. ACTION ADDRESSEE	THIS IS (Call Sign)	REQUEST NO. _____	
2. REQUEST FOR <input type="checkbox"/> HELICOPTER	<input type="checkbox"/> FIXED-WING TRANSPORT	<input type="checkbox"/> OV-10	
3. MISSION PRECEDENCE <input type="checkbox"/> URGENT	<input type="checkbox"/> PRIORITY	<input type="checkbox"/> ROUTINE	
4. TYPE OF MISSION - TACTICAL OR ADMINISTRATIVE			
<input type="checkbox"/> TROOP LIFT	<input type="checkbox"/> SAR	<input type="checkbox"/> RETRACTION	
<input type="checkbox"/> LOGISTIC	<input type="checkbox"/> VIP CODE _____	<input type="checkbox"/> PHOTO	
<input type="checkbox"/> RECON INSERT	<input type="checkbox"/> SPOT/OBS _____	<input type="checkbox"/> UNIT COMDR	
<input type="checkbox"/> MEDEVAC	<input type="checkbox"/> LIAISON	<input type="checkbox"/> OTHER _____	
5. MISSION DESCRIPTION NUMBER OF TROOPS _____ INTERNAL CARGO: WEIGHT/CUBE _____ LARGEST ITEM (LxWxH) _____x____x____ EXTERNAL CARGO: WEIGHT _____			
6. INSTRUCTIONS			
PICKUP TIME	COORDINATES	LZ TIME	COORDINATES
A. _____	_____	_____	_____
B. _____	_____	_____	_____
C. _____	_____	_____	_____
D. _____	_____	_____	_____
7. LZ DESCRIPTION			
SIZE _____			
OBSTACLES _____			
WIND DIRECTION _____			
FRIENDLY POSITION _____			
SECURE/INSECURE _____			
ENEMY POSITION _____		TYPE WEAPONS _____	
8. LZ WILL BE			
<input type="checkbox"/> UNMARKED	<input type="checkbox"/> PANELS	<input type="checkbox"/> FLARES	
<input type="checkbox"/> MARKED WITH _____	<input type="checkbox"/> SMOKE	<input type="checkbox"/> LIGHTS	
(Color) _____	<input type="checkbox"/> OTHER _____		
9. COMMUNICATIONS (For Aircraft and LZCP/TACP)			
P/U ZONE CALL SIGN CHANNEL _____		FM/UHF _____	
FREQ. _____			
LZ CALL SIGN CHANNEL _____		FM/UHF _____	
FREQ. _____			
(Do not give frequency unless no color code designated. If possible, provide both primary and alternate channels.)			
10. LOCAL DATE/TIME _____ AUTHENTICATION _____			
FOR USE BY <u>TACC/TADC/HDC/DASC/SACC/FSCC</u>			
11. RESTRICTIVE PLAN			
LOCAL TIME _____		TO _____ TYPE _____	
COORDINATES (SHACKLE) _____		TO _____ (UNSHACKLED)	
COORD (Encode/Decode) _____		TO _____	
WIDTH FROM CENTERLINE TO EACH SIDE _____		(Meters)	
ALTITUDE FROM _____		TO _____ (Feet)	
12. ESCORT			
<input type="checkbox"/> REQUESTED	NO./TYPE/A/C _____		
<input type="checkbox"/> ASSIGNED	CALL SIGN _____		
COMMUNICATIONS _____			
ARMAMENT CODE _____			
13. BASIC MISSION			
ASSIGNED TO _____		NO./TYPE/A/C _____	
(Unit/Call Sign)			
COMMUNICATIONS _____			
14. MISSION CANCELLED <input type="checkbox"/> BY WHOM _____			
15. MISSION REQUEST			
SENT TO _____			
RECD BY _____			
16. TERMINATE REQUEST			
A. IF UNABLE TO COMPLETE BY: DTG _____			
B. WHEN COMPLETED _____			
17. MISSION RESULTS			
COMPLETED _____			
OTHER _____			
(Include pilot reports. Use back of this form when necessary.)			



# HELICOPTER FLIGHT TIME MATRIX

	CAMP COURTNEY	CAMP MCTUREOUS	CAMP HANSEN	CAMP SCHWAB	CAMP FOSTER	MCAS FUTENMA	KADENA OPS	NAF NAHA	WHITE BEACH	NTA LZ-13
CAMP COURTNEY		2	5	12	8	9	4	16	6	27
CAMP MCTUREOUS	2		4	11	9	8	3	15	5	26
CAMP HANSEN	5	4		8	9	11	10	21	8	18
CAMP SCHWAB	12	11	8		18	19	18	27	14	10
CAMP FOSTER	8	9	9	18		2	5	10	5	35
MCAS FUTENMA	9	8	13	19	2		7	8	7	37
KADENA OPS	4	3	10	18	5	7		14	7	28
NAF NAHA	16	15	21	27	10	8	14		13	39
WHITE BEACH	6	5	8	14	5	7	7	13		28
NTA LZ-13	27	26	18	10	35	37	28	39	28	

NOTE: All times in minutes.

ENCLOSURE (3)



UNITED STATES MARINE CORPS  
III MARINE EXPEDITIONARY FORCE, FMF  
UNIT 35601

5215

7

From: Adjutant, III Marine Expeditionary Force

To: Assistant Chief of Staff, G-3

Subj: DIRECTIVES REVIEW ON FORCE ORDER 3700.1 (III MEF AND MCB HELICOPTER SEARCH AND RESCUE (MEDEVAC) PROCEDURES)

Ref: (a) MCO P5215.1G

1. The following action is requested per the reference:

XX The subject directive, originating from your section, requires annual review. The reference requires that all directives be reviewed, at a minimum, annually. When a directive becomes 9 years old it will be reviewed for cancellation, revision, or consolidation with a letter-type directive of similar subject, or incorporated in a manual-type directive.

\_\_\_\_\_ The subject directive is over 9 years old. This directive must be revised or cancelled.

2. As directed by the reference, this review must be completed and this form returned endorsed to the Adjutant, not later than \_\_\_\_\_.

F. L. TAPIA JR

FIRST ENDORSEMENT

From: Assistant Chief of Staff, G-3

To: Adjutant, III Marine Expeditionary Force

1. Returned. The subject directive has been reviewed and the following applies:

\_\_\_\_\_ The directive is current and accurate.

\_\_\_\_\_ The directive is outdated but cannot be revised at this time; awaiting directive from higher authority. (see remarks)

\_\_\_\_\_ The directive is less than 9 years old, but requires changes. Required changes are attached, or will be staffed for technical review by \_\_\_\_\_.

\_\_\_\_\_ The directive is no longer required and may be cancelled.

2. Remarks: \_\_\_\_\_